Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
Write the name that is your government-issue picture identification (for example, your driver's		government-issued ire identification (for	Tieara First name Denise	First name
li		license or passport).	Middle name	Middle name
iden		g your picture tification to your	Brooks Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
	11166	ting with the trustee.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
2.		other names you have d in the last 8 years		
		de your married or den names.		
3.	youi num Indi	the last 4 digits of Social Security ber or federal vidual Taxpayer tification number	xxx-xx-8928	

Debtor 1 Tieara Denise Brooks

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		15373 Greenfield Rd Apt 10 Detroit, MI 48227	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Wayne County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Tieara Denise Bro	oks			Case number (if known)	
ell the Court About	Your Bankruptcy C	ase			
apter of the			each, see <i>Notice Required by</i> ge 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankr e box.	uptcy
ng to file under	■ Chapter 7				
	☐ Chapter 11				
	□ Chapter 12				
	☐ Chapter 13				
au will pay the fee		a antino foo when I	file my potition. Discussions	the charles of the control of the co	
ou will pay the fee	about how y	ou may pay. Typical r attorney is submitti	lly, if you are paying the fee yo	k with the clerk's office in your local court for more burself, you may pay with cash, cashier's check, ca alf, your attorney may pay with a credit card or ch	or money
	■ I need to pa			on, sign and attach the Application for Individuals	to Pay
				n only if you are filing for Chapter 7. By law, a jud	
	applies to yo	our family size and y	ou are unable to pay the fee ir	ur income is less than 150% of the official poverty in installments). If you choose this option, you must cial Form 103B) and file it with your petition.	
	ше Аррпеас	on to have the ona	oter 7 1 ming 1 ee walved (Ome	sarromi 1000) and me it with your petition.	
ou filed for	■ No.				
ptcy within the rears?	☐ Yes.				
	District		When	Case number	
	District		When	Case number	
	District		When	Case number	
y bankruptcy	■ No				
pending or being					
y a spouse who is ng this case with by a business r, or by an	☐ Yes.				
	Debtor			Relationship to you	
	District		When	Case number, if known	
	Debtor			Relationship to you	
	District		When	Case number, if known	
ı rent your	□ No Go to	line 12.			
nce?		our landlord obtaine	d an eviction judgment agains	t vou?	
	■ Yes.	No. Go to line 12.	,	.,	
				Judgment Against You (Form 101A) and file it with	h this
		ent your ☐ No. Go to e? ■ Yes. Has y	Pint your No. Go to line 12. Yes. Has your landlord obtaine No. Go to line 12. Yes. Fill out <i>Initial</i>	ent your	Ant your

Der	lieara Denise Bro	OKS			Case number (if known)
Par	t 3: Report About Any Bu	sinesses	You Owr	n as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, Sta	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline	s. If you ir ns, cash-f	ndicate that you are low statement, and t	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of rederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am ı	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention
	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is	s the property?	
	-				Number, Street, City, State & Zip Code

Debtor 1 Tieara Denise Brooks

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Tieara Denise Bro	oks		Case numbe	「 (if known)		
Par	t 6: Answer These Questi	ons for Re	porting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily co	onsumer debts? Consumer debts are defir onal, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
			Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			Yes. Go to line 17.				
		16c.	State the type of debts you o	we that are not consumer debts or busines	s debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.			
Do you estimate that after any exempt property is excluded and		erty is excluded and administrative expenses					
	administrative expenses		■ No				
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes				
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000		
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000	☐ 50,001-100,000		
	□ 100 □ 200			□ 10,001-25,000	☐ More than100,000		
19.	How much do you estimate your assets to		0,000	\$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	be worth?		1 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			01 - \$500,000 01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
20.	How much do you	\$0 - \$5	0,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			01 - \$500,000 01 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
Par	t 7: Sign Below						
For	you	I have exa	mined this petition, and I dec	clare under penalty of perjury that the inform	nation provided is true and correct.		
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request r	elief in accordance with the c	chapter of title 11, United States Code, spec	cified in this petition.		
		bankrupto and 3571.	y case can result in fines up t	concealing property, or obtaining money o to \$250,000, or imprisonment for up to 20 y	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Tieara D	a Denise Brooks enise Brooks of Debtor 1	Signature of Debtor	72		
		Executed	on October 9, 2019	Executed on			
			MM / DD / YYYY	MM	/ DD / YYYY		

Debtor 1	Tieara Denise Brooks	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Ryan B. Moran	Date	October 9, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Ryan B. Moran P70753		
Printed name		
Moran Law		
Firm name		
25600 Woodward Ave		
Suite 201		
Royal Oak, MI 48067		
Number, Street, City, State & ZIP Code		
Contact phone (248) 246-6536	Email address	ecf@moranlawoffice.com
P70753 MI		
Par number & State		

Fill	in this information to identify your case:				
Deb					
Deb	First Name	Middle Name	Last Name		
(Spot	ise if, filing) First Name	Middle Name	Last Name		
Unit	ed States Bankruptcy Court for the: EAS	STERN DISTRICT OF	MICHIGAN		
Cas (if kno	e number 			_	if this is an ed filing
Sui			d Certain Statistical Information		2/15
infor	mation. Fill out all of your schedules firs original forms, you must fill out a new S	st; then complete the	are filing together, both are equally responsible for information on this form. If you are filing amend the box at the top of this page.		
ran	Outilitatize Tour Assets			Your as	coto
					what you own
1.	Schedule A/B: Property (Official Form 10 1a. Copy line 55, Total real estate, from S)6A/B) chedule A/B		\$	0.00
	1b. Copy line 62, Total personal property,	from Schedule A/B		\$	8,612.43
	1c. Copy line 63, Total of all property on S	chedule A/B		\$	8,612.43
Part	2: Summarize Your Liabilities				
				Your lia Amount	bilities you owe
2.	Schedule D: Creditors Who Have Claims 2a. Copy the total you listed in Column A,		Official Form 106D) ne bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsec 3a. Copy the total claims from Part 1 (price	cured Claims (Official lority unsecured claims	Form 106E/F)) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from Part 2 (nor	priority unsecured cla	nims) from line 6j of Schedule E/F	\$	37,851.24
			Your total liabilities	\$ \$	37,851.24
Part	3: Summarize Your Income and Expe	nses			
4.	Schedule I: Your Income (Official Form 10 Copy your combined monthly income from			\$	1,947.59
5.	Schedule J: Your Expenses (Official Form Copy your monthly expenses from line 22d			\$	1,975.00
Part	4: Answer These Questions for Admi	nistrative and Statis	tical Records		
6.	Are you filing for bankruptcy under Cha ☐ No. You have nothing to report on thi	• • •	eck this box and submit this form to the court with yo	our other sch	edules.
7.	■ Yes What kind of debt do you have?				
	■ Your debts are primarily consume	r debts. Consumer de	ebts are those "incurred by an individual primarily for	a personal,	family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,405.38

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	10,214.50
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	10,214.50

19-54372-mbm

		this filing:		
Debtor 1	Tieara Denise Brooks First Name Mic	ldle Name Last Name		
Debtor 2	i iist Name iviic	Idle Name		
Spouse, if filing)	First Name Mic	ldle Name Last Name		
Inited States Bank	kruptcy Court for the: EASTER	N DISTRICT OF MICHIGAN		
Case number				☐ Check if this is ar
				amended filing
Official For	m 106A/B			
	A/B: Property			40/45
		st an asset only once. If an asset fits in more than one	antonomy list the spect	12/15
Do you own or ha	ach Residence, Building, Land, or	Other Real Estate You Own or Have an Interest In		
No. Go to				
☐ Yes. Whe	ere is the property?			
.1		What is the property? Check all that apply	Do not deduct secured	claims or exemptions. Put
Street address if a	available, or other description	— ☐ Single-family home		red claims on Schedule D: aims Secured by Property.
Olioci addioso, ii c	available, or other description	☐ Duplex or multi-unit building	Current value of the	Current value of the
City	State ZIP Code	─ ☐ Condominium or cooperative	entire property? portion you ow \$	
		☐ Manufactured or mobile home		
		☐ Land		
		☐ Investment property		
		Timeshare		
		Other		your ownership interest
		Who has an interest in the property? Check one	a life estate), if known	enancy by the entireties, or
		Debtor 1 only		
		Debtor 2 only		
		<u> </u>	Observit Alvie in an	ommunity property
County		Debtor 1 and Debtor 2 only	 Uneck if this is co 	
County		☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	(see instructions)	minumey property
County			(see instructions)	minumy property

Debtor 1	Tieara Denis	e Brooks Case number (if know	n)
		or homes, ATVs and other recreational vehicles, other vehicles, and accessories motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
■ No □ Yes			
5 A.J.	ha dallar salas af		
		the portion you own for all of your entries from Part 2, including any entries for ed for Part 2. Write that number here=>	\$0.00
Part 3:	escribe Your Perso	nal and Household Items	
·		egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exam</i> □ No		urnishings ces, furniture, linens, china, kitchenware	
■ Ye	s. Describe		
		Various household goods and furnishings Location: 15373 Greenfield Rd Apt 10, Detroit MI 48227	\$1,500.00
□ No	ples: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; musi phones, cameras, media players, games	c collections; electronic devices
		Various household electronics Location: 15373 Greenfield Rd Apt 10, Detroit MI 48227	\$650.00
Exam	other collection	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, co ons, memorabilia, collectibles	oin, or baseball card collections;
□ re:	s. Describe		
Exam	ment for sports ar ples: Sports, photo musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe	es and kayaks; carpentry tools;
■ No	s. Describe		
10. Firea	rms	s, shotguns, ammunition, and related equipment	
■ Ye	s. Describe		
		9mm pistol Location: 15373 Greenfield Rd Apt 10, Detroit MI 48227	\$300.00
		<u> </u>	
□ No	mples: Everyday clo	othes, furs, leather coats, designer wear, shoes, accessories	
■ Ye	s. Describe		
		Various articles of used clothing Location: 15373 Greenfield Rd Apt 10, Detroit MI 48227	\$800.00

Debtor 1	Tieara Denise	Brook	(S	Ca	ase number (if known)	
☐ No		elry, cos	stume jewelry, engage	ement rings, wedding rings, heirloom jewe	elry, watches, gems, go	ld, silver
	F					
			ıs rings, earrings, Ilaneous jewelry	necklaces, bracelets, watches and	d other	
				eld Rd Apt 10, Detroit MI 48227		\$50.00
	irm animals ples: Dogs, cats, bi	rde hor	200			
■ No	pies. Dogs, cats, bi	ius, rioi	ses			
	Describe					
I4. Any ot □ No	her personal and	housel	nold items you did n	ot already list, including any health aic	ds you did not list	
Yes.	Give specific infor	mation.				
		Nebul	izer			
	L	Locati	on: 15373 Greenfi	eld Rd Apt 10, Detroit MI 48227		\$300.00
15 Add (the dollar value of	all of v	our entries from Pa	rt 3, including any entries for pages yo	nu have attached	
					ou nave attacheu	\$3,600.00
					L	
	scribe Your Financia					
Do you ov	vn or have any leç	jal or e	quitable interest in a	ny of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
l6. Cash <i>Exam</i> l □ No	oles: Money you ha	ive in yo	our wallet, in your hom	ne, in a safe deposit box, and on hand wh	nen you file your petitior	1
Yes						
					Cash on	
					Debtor's	\$400.00
					person	
				ints; certificates of deposit; shares in crec with the same institution, list each.	dit unions, brokerage ho	ouses, and other similar
□ No				Institution name:		
■ Yes						
		47.4	Sovings	DFCU Christmas Club Inactive account		\$10.00
		17.1.	Savings	machive account		φ10.00
				Navy Federal Credit Union		
		17.2.	Checking	Opened 09/11/2019		\$127.00
		17.0	Savings	Navy Federal Credit Union Opened 09/11/2019		\$5.00
		17.3.	Savings	Opened 03/11/2013		\$5.00

Debtor 1	Tieara Denis	e Brooks		Case number (if known)	
		or publicly traded stocks investment accounts with broke	erage firms, money market accounts	s		
■ No □ Yes		Institution or issuer na	me:			
	oublicly traded sto venture	ock and interests in incorpora	ated and unincorporated busines	ses, including ar	ı interest in	an LLC, partnership, and
	. Give specific info	ormation about them Name of entity:		% of ownersh	ip:	
		Tee's Tasty Treat, LL0	<u> </u>	100	%	\$0.00
Nego Non- ■ No	tiable instruments negotiable instrum	include personal checks, cashi ents are those you cannot trans	able and non-negotiable instrume ers' checks, promissory notes, and sfer to someone by signing or delive	money orders.		
⊔ Yes	. Give specific info	rmation about them Issuer name:				
	ement or pension apples: Interests in I		B(b), thrift savings accounts, or other	r pension or profit	-sharing plan	ns
	. List each accoun	t separately. Type of account:	Institution name:			
Your		d deposits you have made so th	nat you may continue service or use iblic utilities (electric, gas, water), te		companies,	or others
_	i		Institution name or individual:			
		Security Deposit	Security Deposit on hand	with landlord		\$650.00
		Security Deposit	DTE			\$115.00
23. Annu I No	ities (A contract fo	or a periodic payment of money	to you, either for life or for a numbe	r of years)		
	Iss	suer name and description.				
		on IRA, in an account in a qua 529A(b), and 529(b)(1).	lified ABLE program, or under a	qualified state tu	ition progra	m.
	Ins	stitution name and description.	Separately file the records of any in	terests.11 U.S.C.	§ 521(c):	
■ No	-	ture interests in property (other	er than anything listed in line 1),	and rights or pov	vers exercis	sable for your benefit
	•	ademarks, trade secrets, and	other intellectual property			
<i>Exan</i> ■ No	nples: Internet dom		from royalties and licensing agreer	ments		
27. Licen	ses, franchises, a	and other general intangibles			al lianana	
■ No	,	•	ative association holdings, liquor lic	enses, profession	ai iicerises	
	r property owed t	ormation about them o you?				Current value of the portion you own?
						Do not deduct secured

Debtor 1	Tieara Denise Brooks		C	ase number (if known)	
					claims or exemptions.
☐ No	efunds owed to you . Give specific information about t	hem, including whether you already filed	the returns an	d the tax years	
				·	
		Anticipated 2018 Income Tax R	efund	Federal	\$1,000.00
		Anticipated 2018 Income Tax R	efund	Federal Federal State State State A company workers' compensation pay, workers' compensation pay, workers' insurance eneficiary: Other or are currently entitled to receive	\$500.00
				1	
		Anticipated 2019 Income Tax R	efund	Federal	\$850.00
		Anticipated 2019 Income Tax R	efund	State	\$400.00
■ No □ Yes. 30. Other Exam ■ No □ Yes. 31. Intere Exam □ No	amounts someone owes you ples: Unpaid wages, disability ins benefits; unpaid loans you r. Give specific information	rrance; health savings account (HSA); cr	c pay, vacation	pay, workers' compen	sation, Social Security
	, ,	e insurance through employer	Beneficial	y.	value:
		as no cash surrender value	Mother		\$0.00
If you some		ou from someone who has died st, expect proceeds from a life insurance	policy, or are c	currently entitled to rece	ive property because
Exam ■ No	aples: Accidents, employment disp	or not you have filed a lawsuit or made outes, insurance claims, or rights to sue	le a demand f	or payment	
	. Describe each claim	aims of every nature, including counts	erclaims of the	e debtor and rights to	set off claims
■ No	. Describe each claim	anno or every nature, moluumy counte	, oranna Or III	c accion and rights to	oct on Gains
35. Any fi ■ No	nancial assets you did not alrea	ady list			
Official For	rm 106A/B	Schedule A/B: Property			page 5

Best Case Bankruptcy

Debtor 1	Tieara Denise Brooks	Case number (if known)	
☐ Yes	s. Give specific information		
	I the dollar value of all of your entries from Part 4, including any entries for p Part 4. Write that number here		\$4,057.00
Part 5: Do	Describe Any Business-Related Property You Own or Have an Interest In. List any real e	state in Part 1.	
	u own or have any legal or equitable interest in any business-related property? Go to Part 6.		
	Go to line 38.		
			Current value of the portion you own? Do not deduct secured claims or exemptions.
	unts receivable or commissions you already earned		
■ No □ Yes	s. Describe		
Exam □ No	e equipment, furnishings, and supplies nples: Business-related computers, software, modems, printers, copiers, fax mach b. Describe	ines, rugs, telephones, desks, d	chairs, electronic devices
	Baking pans and supplies		\$200.00
■ No	inery, fixtures, equipment, supplies you use in business, and tools of your to	rade	
41. Inven t ■ No	itory		
	s. Describe		
42. Intere ■ No	ests in partnerships or joint ventures		
☐ Yes	s. Give specific information about them Name of entity:	% of ownership:	
■ No.	omer lists, mailing lists, or other compilations our lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	,	
	■ No □ Yes. Describe		
44. Any b ■ No	ousiness-related property you did not already list		
☐ Yes	s. Give specific information		

Del	otor 1 Tieara D	Denise Brooks Case number (if known)	
45.		alue of all of your entries from Part 5, including any entries for pages you have attached that number here	\$200.00
Par		farm- and Commercial Fishing-Related Property You Own or Have an Interest In. we an interest in farmland, list it in Part 1.	
46.	Do you own or ha	eve any legal or equitable interest in any farm- or commercial fishing-related property?	
	Yes. Go to line 4	7.	Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals Examples: Livesto	ock, poultry, farm-raised fish	
	□ No □ Yes		
48	Crops—either are	owing or harvested	
[□ No □ Yes. Give specifi		
40	Farm and Californ		
	_	equipment, implements, machinery, fixtures, and tools of trade	
	□ No □ Yes		
50.	Farm and fishing	supplies, chemicals, and feed	
[□ No □ Yes		
51.	Any farm- and co	mmercial fishing-related property you did not already list	
	□ No □ Yes. Give specifi	ic information	
52.		alue of all of your entries from Part 6, including any entries for pages you have attached that number here	
Par	Describe A	All Property You Own or Have an Interest in That You Did Not List Above	
_		r property of any kind you did not already list? n tickets, country club membership	
ı	Yes. Give specifi	ic information	
		Funds garnished 90 days prior to filing	\$755.43

Debtor 1 Case number (if known) **Tieara Denise Brooks** 54. Add the dollar value of all of your entries from Part 7. Write that number here \$755.43 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$0.00 Part 3: Total personal and household items, line 15 57. \$3,600.00 Part 4: Total financial assets, line 36 \$4,057.00 59. Part 5: Total business-related property, line 45 \$200.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$755.43 Total personal property. Add lines 56 through 61... \$8,612.43 Copy personal property total \$8,612.43 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$8,612.43

Fill in this infor	mation to identify your	2250:			
Debtor 1	Tieara Denise Bro				
Dahtan	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT (OF MICHIGAN		
Case number (if known)					☐ Check if this is an amended filing
Official Fo	orm 106C				
Schedul	le C: The Pro	perty You (Claim as Exemp	ot	4/19
the property you	listed on <i>Schedule A/B: F</i> and attach to this page as i	Property (Official Form 106	filing together, both are equally 6A/B) as your source, list the produitional Page as necessary. On	perty that you claim	
specific dollar a any applicable s funds—may be exemption to a p	mount as exempt. Alter statutory limit. Some exe unlimited in dollar amou	natively, you may claim emptions—such as thos int. However, if you clai	ify the amount of the exemption the full fair market value of the se for health aids, rights to recomman exemption of 100% of fair operty is determined to exceed	e property being e eive certain benefi ir market value und	xempted up to the amount of ts, and tax-exempt retirement der a law that limits the
Part 1: Ident	ify the Property You Cla	im as Exempt			
1. Which set o	of exemptions are you cl	aiming? Check one only	, even if your spouse is filing wit	h you.	
☐ You are c	claiming state and federal	nonbankruptcy exemptio	ns. 11 U.S.C. § 522(b)(3)		
You are c	claiming federal exemption	ns. 11 U.S.C. § 522(b)(2)		
2 For any pro	nerty you list on Sched	ule Δ/R that you claim a	s exempt fill in the information	n helow	

Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Various household goods and 11 U.S.C. § 522(d)(3) \$1,500.00 \$1,500.00 furnishings Location: 15373 Greenfield Rd Apt 100% of fair market value, up to 10, Detroit MI 48227 any applicable statutory limit Line from Schedule A/B: 6.1 Various household electronics 11 U.S.C. § 522(d)(3) \$650.00 \$650.00 Location: 15373 Greenfield Rd Apt 10, Detroit MI 48227 100% of fair market value, up to Line from Schedule A/B: 7.1 any applicable statutory limit 9mm pistol 11 U.S.C. § 522(d)(5) \$300.00 \$300.00 Location: 15373 Greenfield Rd Apt 10, Detroit MI 48227 100% of fair market value, up to Line from Schedule A/B: 10.1 any applicable statutory limit Various articles of used clothing 11 U.S.C. § 522(d)(3) \$800.00 \$800.00 Location: 15373 Greenfield Rd Apt 10, Detroit MI 48227 100% of fair market value, up to Line from Schedule A/B: 11.1 any applicable statutory limit

Official Form 106C

Schedule C: The Property You Claim as Exempt

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Crie	ck only one box for each exemption.	
Various rings, earrings, necklaces, bracelets, watches and other	\$50.00		\$50.00	11 U.S.C. § 522(d)(4)
miscellaneous jewelry Location: 15373 Greenfield Rd Apt 10, Detroit MI 48227 Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
Nebulizer Location: 15373 Greenfield Rd Apt	\$300.00		\$300.00	11 U.S.C. § 522(d)(9)
10, Detroit MI 48227 Line from Schedule A/B: 14.1			100% of fair market value, up to any applicable statutory limit	
Cash on Debtor's person Line from Schedule A/B: 16.1	\$400.00	•	\$400.00	11 U.S.C. § 522(d)(5)
Ellio II olii osiioddio 772. Terr			100% of fair market value, up to any applicable statutory limit	
Savings: DFCU Christmas Club	\$10.00	•	\$10.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
Checking: Navy Federal Credit Union Opened 09/11/2019	\$127.00		\$127.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
Savings: Navy Federal Credit Union Opened 09/11/2019	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
Tee's Tasty Treat, LLC 100 % ownership	\$0.00		\$0.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 19.1			100% of fair market value, up to any applicable statutory limit	
Security Deposit: Security Deposit on hand with landlord	\$650.00	•	\$650.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	
Security Deposit: DTE Line from Schedule A/B: 22.2	\$115.00		\$115.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Federal: Anticipated 2018 Income Tax Refund	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
State: Anticipated 2018 Income Tax Refund	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 28.2			100% of fair market value, up to	

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption
•	Federal: Anticipated 2019 Income Tax Refund Line from <i>Schedule A/B</i> : 28.3	\$850.00		\$850.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
	State: Anticipated 2019 Income Tax Refund Line from <i>Schedule A/B</i> : 28.4	\$400.00		\$400.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
	Term life insurance through employer Policy has no cash surrender value Beneficiary: Mother Line from <i>Schedule A/B</i> : 31.1	\$0.00		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(7)
	Baking pans and supplies Line from Schedule A/B: 39.1	\$200.00		\$200.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
1	Funds garnished 90 days prior to filing Line from Schedule A/B: 53.1	\$755.43		\$755.43 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 ■ No □ Yes. Did you acquire the property covered □ No □ Yes	3 years after that for ca	ises fil	·	

Fill in this information	n to identify you				
	ieara Denise B rst Name	Middle Name Last Name			
Debtor 2	.o. raine	made name			
(Spouse if, filing) Fi	rst Name	Middle Name Last Name			
United States Bankrup	otcy Court for the	EASTERN DISTRICT OF MICHIGAN			
Case number					
(if known)				☐ Chec	k if this is an
<u> </u>				amen	ded filing
Official Form 10	neD				
		Who Hoyo Claims Sours	d by Droport		40/45
Schedule D:	Creditors	Who Have Claims Secure	a by Propert	<u>y </u>	12/15
		If two married people are filing together, both are eout, number the entries, and attach it to this form. O			
number (if known).	itional Page, illi it	out, number the entries, and attach it to this form. C	in the top of any addition	nai pages, write your no	ame and case
1. Do any creditors have	claims secured by	your property?			
■ No. Check this	box and submit t	his form to the court with your other schedules. Y	ou have nothing else t	o report on this form.	
☐ Yes. Fill in all o	of the information	below.			
Part 1: List All Se	cured Claims		0.1	0.1	0.1
		more than one secured claim, list the creditor separately		Column B	Column C
		a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1.		Describe the property that secures the claim:			
Creditor's Name			7	_	
		As of the date you file, the claim is: Check all that			
		apply. Contingent			
Number, Street, City,	State & Zin Code	☐ Unliquidated			
rumbor, otroot, ony,	otate a zip oode	☐ Disputed			
		·			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
Debtor 1 only					
☐ Debtor 2 only ☐ Debtor 1 and Debtor 3	2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the de		☐ Judgment lien from a lawsuit			
Check if this claim r		Other (including a right to offset)			
Date debt was incurred		Last 4 digits of account number			
Add the dollar value of	of vour entries in C	olumn A on this page. Write that number here:		7	
	•	the dollar value totals from all pages.		-	
Write that number he					

Fill in	this informa	ation to identify your case:				
Debto	or 1	Tieara Denise Brooks				
		First Name	Middle Name Last Name			
Debto (Spouse	or 2 e if, filing)	First Name	Middle Name Last Name			
Linita	d Ctataa Dani	Issuestan Count for the FAC	FERN DISTRICT OF MICHIGAN			
United	d States Bani	kruptcy Court for the: EAS	TERN DISTRICT OF MICHIGAN			
1	number					
(if know	vn)				_	k if this is an
					amen	ded filing
Offic	cial Form	106E/F				
Sch	edule E/	F: Creditors Who I	lave Unsecured Claims			12/15
any exc Schedu Schedu left. Att name a	ecutory contra ule G: Executo ule D: Creditor tach the Conti and case numb	acts or unexpired leases that co bry Contracts and Unexpired Le rs Who Have Claims Secured by nuation Page to this page. If yo ber (if known).	for creditors with PRIORITY claims and Part uld result in a claim. Also list executory contiases (Official Form 106G). Do not include any Property. If more space is needed, copy the fundamental in a Part, do n	racts on Schedule A/B: Pr creditors with partially se Part you need, fill it out, n	roperty (Official Fo ecured claims that number the entries	rm 106A/B) and on are listed in in the boxes on the
Part 1		of Your PRIORITY Unsecur				
_	_	s have priority unsecured claim	s against you?			
	No. Go to Pa	rt 2.				
	Yes.	prioritypoorrod oloimo If	avaditar had mare than and priority (management	Join list the avaditor concr	ataly for each alaim	For each alaim
2.	listed, identify much as poss	what type of claim it is. If a claim sible, list the claims in alphabetica	a creditor has more than one priority unsecured c has both priority and nonpriority amounts, list tha order according to the creditor's name. If you ha a particular claim, list the other creditors in Part 3	at claim here and show both ave more than two priority u	priority and nonpric	ority amounts. As
	(For an expla	nation of each type of claim, see t	ne instructions for this form in the instruction bool	klet.) Total claim	Priority	Nonpriority
				Total Claim	Priority amount	Nonpriority amount
2.1.						
2.1.						
	Priority Cred	ditor's Name	Last 4 digits of account number			
	,		When was the debt incurred?			
	Number Stre	eet City State Zip Code	As of the date you file, the claim is: Chec ☐ Contingent	ck all that apply		
١	Who incurred	the debt? Check one.	☐ Unliquidated			
ı	Debtor 1 on	ly	☐ Disputed			
ı	Debtor 2 on	ly	·			
I	Debtor 1 an	d Debtor 2 only				
_	_	of the debtors and another	Type of PRIORITY unsecured claim:			
I	∐ Check if thi	is claim is for a community deb	t Domestic support obligations			
I	ls the claim su	bject to offset?	☐ Taxes and certain other debts you owe	the government		
I	□ No		Claims for death or personal injury while	e you were intoxicated		
I	☐ Yes		Other. Specify			
						_
Part 2	liet All	of Your NONPRIORITY Uns	ocured Claims			
_	_	s have nonpriority unsecured c	•			
	■ No. You have	e nothing to report in this part. Sub	mit this form to the court with your other schedule	3 S.		
	Yes.					
ur th:	nsecured claim,	, list the creditor separately for each	the alphabetical order of the creditor who hol th claim. For each claim listed, identify what type ther creditors in Part 3.If you have more than thre	of claim it is. Do not list claim	ims already included	d in Part 1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 9

Debto	Tieara Denise Brooks		Case number (if known)	
4.1	Akron Billing Center Nonpriority Creditor's Name	Last 4 digits of account number	3247	\$885.00
	2620 Ridgewood Rd Suite 300	When was the debt incurred?	06-01-19	
	Akron, OH 44313 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Medical Bil	<u> </u>	
4.2	Americollect	Last 4 digits of account number	6959	\$627.00
	Nonpriority Creditor's Name PO Box 1566	When was the debt incurred?	02-08-19	
	814 S. 8th St.	When was the dest incurred.	02-00-13	
	Manitowoc, WI 54221-1566	_		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Пол		
	Debtor 1 only Debtor 2 only	☐ Contingent		
		☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another☐ Check if this claim is for a community	☐ Student loans	a Gain.	
	debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	, ,	Account on behalf of Medical	
4.3	Arbor Professional Sol	Last 4 digits of account number	8072	\$573.00
	Nonpriority Creditor's Name 2090 S. Main Street Ann Arbor, MI 48103	When was the debt incurred?	Opened 03/15	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection Ambulance	Attorney City Of Dearborn	

or 1 Tieara Denise Brooks		Case number (if known)	
Beaumont	Last 4 digits of account number	3318	\$895.36
Nonpriority Creditor's Name 750 Stephenson Highway PO Box 5042	When was the debt incurred?	7-16-19	
Troy, MI 48007 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical bill	<u> </u>	
Capital One Bank Usa N Nonpriority Creditor's Name	Last 4 digits of account number	3477	\$844.00
Po Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	Opened 01/19 Last Active 8/21/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
\square Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Check Into Cash	Last 4 digits of account number	8928	\$350.0
Nonpriority Creditor's Name PO Box 550	When was the debt incurred?	2019	
Cleveland, TN 37364 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam's	S. Oneok all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
■ No	·		
Yes	Other. Specify Unsecured	Loan	

au a l						
Citizens Bank Nonpriority Creditor's Name	Last 4 digits of account number	8928	Unknowr			
One Citizens Plaza Providence, RI 02903	When was the debt incurred?	2018				
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
No	Debts to pension or profit-sharing	ng plans, and other similar debts				
☐ Yes	Other. Specify Banking Fe	ees				
City of Dearborn	Last 4 digits of account number	4605	\$860.00			
Nonpriority Creditor's Name PO Box 2122	When was the debt incurred?	06-20-19				
Riverview, MI 48193 Number Street City State Zip Code		in Ohashall that as als				
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,					
Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt	Obligations arising out of a sepa	aration agreement or divorce that you did not				
s the claim subject to offset?	report as priority claims					
No	Debts to pension or profit-sharing	• • • • • • • • • • • • • • • • • • • •				
Yes	Other. Specify Medical Ch	arges				
Convergent Outsourcing	Last 4 digits of account number	9661	\$275.00			
Nonpriority Creditor's Name Po Box 9004	When was the debt incurred?	Opened 05/17				
Renton, WA 98057 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.	•	,				
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
No	Debts to pension or profit-sharing	ng plans, and other similar debts				
— 110	The state of the s	Attorney Comcast				

Tieara Denise Brooks		Case number (if known)			
Credit Acceptance Corp	Last 4 digits of account number	7233	\$11,673.8		
Nonpriority Creditor's Name Po Box 5070 Southfield, MI 48086	When was the debt incurred?	Opened 10/14 Last Active 9/06/19			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i				
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	Other. Specify Garnishme	nt			
Credit One Bank Na	Last 4 digits of account number	9296	\$339.0		
Nonpriority Creditor's Name		Opened 05/10 Lest Active			
Po Box 98872	When was the debt incurred?	Opened 05/19 Last Active 8/21/19			
Las Vegas, NV 89193 Number Street City State Zip Code	As of the date you file, the claim i	is: Chack all that apply			
Who incurred the debt? Check one.	S. Offect all that apply				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt		ration agreement or divorce that you did not			
s the claim subject to offset?	report as priority claims	a plane, and other similar debte			
■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card				
	- Other. Specify	·			
Dept Of Ed/navient	Last 4 digits of account number	1223	\$4,134.0		
Nonpriority Creditor's Name Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 09/10 Last Active 2/20/18			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply			
Who incurred the debt? Check one.	•				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured				
Check if this claim is for a community	Student loans				
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
No	Debts to pension or profit-sharin	o plans, and other similar debts			
■ No □ Yes	_	g p.s s, and outer official dobts			
⊒ Tes	☐ Other. Specify Educationa				

Tieara Denise Brooks		Case number (if known)			
Daniel Of Editory in the		4222	64 440 0		
Dept Of Ed/navient Nonpriority Creditor's Name	Last 4 digits of account number	<u>1223</u>	\$1,116.0		
		Opened 03/11 Last Active			
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	2/20/18			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
☐Yes	Other. Specify				
	Educationa	al			
First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	3715	\$490.0		
3820 N Louise Ave	When was the debt incurred?	Opened 04/19 Last Active 7/09/19			
Sioux Falls, SD 57107 Number Street City State Zip Code	As of the data you file the claim	in Observation			
Who incurred the debt? Check one.	As of the date you file, the claim				
■ Debtor 1 only	O continuent				
_	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:			
At least one of the debtors and another	☐ Student loans	a dam.			
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not			
_	report as priority claims	and the same of th			
■ No	Debts to pension or profit-sharing plans, and other similar debts				
Yes	Other. Specify Credit Card	<u> </u>			
Henry Ford Community College	Last 4 digits of account number	9939	\$3,201.4		
Nonpriority Creditor's Name Learning Resource Center	When was the debt incurred?	9-11-19			
Cashier's Office 5101 Evergreen Road Dearborn, MI 48128	_				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	Student loans				
debt		aration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims	an plane and other similar 4-14-			
No No	Debts to pension or profit-sharin	ig pians, and other similar debts			
Yes	Other. Specify Tuition				

tor 1 Tieara Denise Brooks	Case number (if known)				
Huntington Bank	Last 4 digits of account number 2019	\$175.00			
Nonpriority Creditor's Name Attn: Bankruptcy 6101 W. 130th St. NE-08	When was the debt incurred? 8928	_			
Parma, OH 44130 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	t			
■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
Yes	Other. Specify Banking Fees	_			
Mary Jane M Elliott	Last 4 digits of account number 3227	\$410.12			
Nonpriority Creditor's Name					
24300 Karim Blvd. Novi, MI 48375	When was the debt incurred? 9-16-19	_			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	t			
■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Capital Systems, LLC				
National Credit System	Last 4 digits of account number 8950	\$4,038.00			
Nonpriority Creditor's Name P.o. Box 312125 Atlanta, GA 31131	When was the debt incurred? Opened 06/18	_			
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	_				
Debtor 1 only	Contingent				
Debtor 2 only	Unliquidated				
Debtor 1 and Debtor 2 only	Disputed				
At least one of the debtors and another					
☐ Check if this claim is for a community debt Is the claim subject to offset?	 ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	t			
No	Debts to pension or profit-sharing plans, and other similar debts				
— NO					
Yes	Collection Attorney Trumbull Crossing Other. Specify Apts				

or 1 Tieara Denise Brooks		Case number (if known)	
Us Dept Of Ed/glelsi Nonpriority Creditor's Name	Last 4 digits of account number	8581	\$4,964.5
2401 International Lane Madison, WI 53704	When was the debt incurred?	Opened 09/10 Last Active 08/13	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans	d Glaini.	
☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		
	Educationa	al	
Wayne County Community College	Last 4 digits of account number	8928	\$2,000.0
Nonpriority Creditor's Name Office of the General Counsel 801 W. Fort St.	When was the debt incurred?	2018	
Detroit, MI 48226 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Tuition		
2: List Others to Be Notified About a Del this page only if you have others to be notified a rying to collect from you for a debt you owe to so we more than one creditor for any of the debts that ified for any debts in Parts 1 or 2, do not fill out of	about your bankruptcy, for a debt that youngeneedse, list the original creditor in	Parts 1 or 2, then list the collection agency h	ere. Similarly, if you
e and Address	On which entry in Part 1 or Part 2 did you	_	
n District Court ort Clerk		Part 1: Creditors with Priority Unsecured Claims	
Madison Street	-	Part 2: Creditors with Nonpriority Unsecured Cla	aims
oit, MI 48226	Last 4 digits of account number	7233	
e and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
of Dearborn Fire Department	Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
0 Greenfield Rd. rborn, MI 48120	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Cla	aims
e and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
	· · · · · · · · · · · · · · · · · · ·	f I Part 1: Creditors with Priority Unsecured Claims	
D Beach Rd.		Part 2: Creditors with Nonpriority Unsecured Cla	
: Huron, MI 48060	Last 4 digits of account number	. ,	
e and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
	,	 	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 9

Debtor 1 Tieara Denise Brooks		Case number (if known)				
Jefferson Capital Sys, LLC	Line 4.17 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 953185		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Saint Louis, MO 63195	Last 4 digits of account number	0018				
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?				
Medical Center Emergency Services	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 96115 Oklahoma City, OK 73143		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Oklahoma Oity, Oit 75145	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
Roosen, Varchetti & Oliver PLLC	Line 4.10 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
P.O. Box 2305 Mount Clemens, MI 48046		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Mount Clemens, Mi 40040	Last 4 digits of account number	7233				
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?				
Trumbull Crossing Apartments	Line 4.18 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
5500 Trumbull St, Detroit, MI 48208		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Detroit, Wi 40200	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
United Collection Bureau Inc.	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
5620 Southwyck Blvd. Toledo, OH 43614		■ Part 2: Creditors with Nonpriority Unsecured Claims				
10leu0, Off 43014	Last 4 digits of account number	1616				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 10,214.50
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 27,636.74
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 37,851.24

Fill in this infor				
Debtor 1	Tieara Denise Bro			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT C	PF MICHIGAN	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

Senyah El Management Group 24724 Farmbrook Rd Suite 100 Southfield, MI 48034

Residential Lease Agreement 07/08/2019 - 06/30/2020

Debtor 1	Tieara Denise Bro	ooks			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	EASTERN DISTRICT O	OF MICHIGAN		
Case numb (if known)	per				☐ Check if this is an amended filing
	l Form 106H ule H: Your Cod	ebtors			12/15
people are ill it out, ar our name	filing together, both are equ	ally responsible for sup boxes on the left. Attacl . Answer every question	plying correct informa h the Additional Page n.	tion. If more space is no to this page. On the top	ate as possible. If two married eeded, copy the Additional Page, of any Additional Pages, write
■ No □ Yes	nin the last 8 years, have you	lived in a community p	roperty state or territo	ry? (Community property	v states and territories include
■ No.	a, California, Idaho, Louisiana, Go to line 3. . Did your spouse, former spot			ington, and Wisconsin.)	
in line Form 1 out Co	2 again as a codebtor only i 106D), Schedule E/F (Official blumn 2.	f that person is a guaran	ntor or cosigner. Make	sure you have listed th 06G). Use Schedule D, S	g with you. List the person shown le creditor on Schedule D (Officia Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, li ☐ Schedule G, line	ne
	Number Street City	State	ZIP Code	_	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, li ☐ Schedule G, line	ne
	Number Street City	State	ZIP Code	_	

Fill	in this information to identify your	case:								
De	btor 1 Tieara Den	ise Brooks								
1 -	btor 2									
Un	ited States Bankruptcy Court for th	e: EASTERN DISTRICT	OF MICHIGAN							
	se number nown)		-				eck if this is An amendo A supplem	ed filing	g postpetition	chapter
\sim	fficial Forms 400l								ollowing date:	
	<u>fficial Form 106l</u> chedule I: Your Ind						MM / DD/	YYYY		12/15
Be a sup spo atta	as complete and accurate as popplying correct information. If yourse. If you are separated and youch a separate sheet to this form The separate sheet to this form The separate sheet to this form	ssible. If two married pec u are married and not fili our spouse is not filing w . On the top of any additi	ng jointly, and your ith you, do not inclu	spouse ide infor	is liv mati	ing wit	h you, incl ut your sp	ude inforr ouse. If m	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor	2 or non-fi	iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed				☐ Empl	oyed employed		
	employers.	Occupation	Security							
	Include part-time, seasonal, or self-employed work.	Employer's name	SecurAmerica							
	Occupation may include student or homemaker, if it applies.	Employer's address	1001 Woodward Detroit, MI 4822		te 9	75				
		How long employed t	here? 3 mont	ths						
Pa	rt 2: Give Details About Mo	onthly Income								
	imate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to r	report for	any	line, wr	ite \$0 in the	space. In	clude your noi	n-filing
	ou or your non-filing spouse have r e space, attach a separate sheet t		ombine the information	on for all	empl	oyers fo	or that perso	on on the li	nes below. If	you need
						For D	ebtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$		2,457.00	\$	N/A	
3.	Estimate and list monthly ove	rtime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	2,	457.00	\$	N/A	

			For	Debtor 1	For Debto		
	Copy line 4 here	4.	\$	2,457.00	\$	N/A	
5.	List all payroll deductions:						
J.	• •	Fo	¢.	500.44	œ.	NI/A	
	5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans	5a. 5b.	\$_ \$	509.41	\$ \$	N/A N/A	-
	, ,	5b. 5c.	\$ 	0.00	\$		-
	5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans	5d.	* *	0.00	\$	N/A	
	5e. Insurance	5a. 5e.	\$ 	0.00	\$	N/A N/A	-
	5f. Domestic support obligations	5e. 5f.	\$ 		\$	N/A	-
	5g. Union dues	51. 5g.	\$ 	0.00	Φ	N/A N/A	
	5h. Other deductions. Specify:	5g. 5h.+			+ \$	N/A N/A	-
_	. ,				· · · · · · · · · · · · · · · · · · ·		-
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. _	\$	509.41	\$	N/A	-
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,947.59	\$	N/A	-
8.	List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b. Interest and dividends	8b.	\$ 	0.00	\$	N/A N/A	
	8c. Family support payments that you, a non-filing spouse, or a depende		Ψ_	0.00	Φ	N/A	-
	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d. Unemployment compensation	8d.	\$_	0.00	\$	N/A	
	8e. Social Security	8e.	\$_	0.00	\$	N/A	-
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	-
	8g. Pension or retirement income	8g.	\$_	0.00	\$	N/A	
	8h. Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	=
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	\
10	Calculate monthly income. Add line 7 + line 9.	10. \$		1,947.59 + \$	N/A	= \$	1,947.59
10.	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. Ψ		1,947.39 + Ψ_	11//	┤ ¯ Ψ —	1,347.33
11.	State all other regular contributions to the expenses that you list in Schedulinclude contributions from an unmarried partner, members of your household, you other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not specify:	our depen			ed in <i>Schedu</i>	le J. +\$	0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The r Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Cer</i> applies					\$	1,947.59
						Combin	
13.	Do you expect an increase or decrease within the year after you file this for No.	rm?				monthly	y income
	Yes. Explain:						
	<u> </u>						

ΞIII	in this informa	tion to identify yo	our case.					
						6.		
Deb	tor 1	Tieara Denis	e Brooks	3		Che	ck if this is: An amended filing	
Deb	otor 2						•	ving postpetition chapter
(Spo	ouse, if filing)					_	13 expenses as of	the following date:
Unit	ed States Bankr	uptcy Court for the:	EASTE	RN DISTRICT OF MICHIG	AN		MM / DD / YYYY	
	e numbe r nown)							
Of	fficial Fo	rm 106J						
S	chedule	J: Your I	Expen	ses				12/15
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.				
Par		ibe Your House	hold					
1.	Is this a join							
	■ No. Go to □ Yes. Doe	line 2. s Debtor 2 live i	n a separa	ate household?				
	□ No	-	st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Deb	otor 2	
_			_	a	rer coparate ricace			
2.	Do you have	e dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
3.	Do your exp	enses include	_	No				□ res
	expenses of	f people other the d your depender	han $_{\square}$	Yes				
Est	imate your ex		our bankru	y Expenses iptcy filing date unless y y is filed. If this is a supp				
the		n assistance and		government assistance in luded it on <i>Schedule I:</i> Y			Your expe	enses
,	10	,						
4.		r home ownersl ad any rent for the		ses for your residence. It r lot.	nclude first mortgage	e 4. :	\$	700.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a.	\$	0.00
	•	rty, homeowner's				4b.	:	15.00
				pkeep expenses		4c.		0.00
5.		owner's associati nortgage pavme		nominium dues P ur residence, such as ho	me equity loans	4d. 5.	·	0.00 0.00
								0.00

Official Form 106J Schedule J: Your Expenses 19-54372-mbm Doc 1 Filed 10/09/19 Entered 10/09/19 12:48:57 Page 35 of 54

modification to the terms of your mortgage?

No.

☐ Yes.

Explain here: Lines 15c and 17a reflect Debtor's anticipated car payment and car insurance expense once she is able obtain financing.

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Fill in this infor		_			
Debtor 1	Tieara Denise B	rooks Middle Name	Last Name		
Debtor 2	T not reame	Wildele Hame	Last Hamo		
Spouse if, filing)	First Name	Middle Name	Last Name		
Inited States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
ase number					
f known)					Check if this is an amended filing
\#:a:a! ⊏a	400D				
Official For			Dahtaria Caha	dulaa	
<i>j</i> eciarai	ion About	an Individual	Deptor S Sche	AIIIAC	12/1
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Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in this info	rmation to identify your	c350:		
Debtor 1	Tieara Denise Bro	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Sankruptcy Court for the:	EASTERN DISTRICT OF MICH	IGAN	
Case number (if known)				☐ Check if this is an amended filing
Be as complete	t of Financial A	ole. If two married people are filir	s Filing for Bankruptc ng together, both are equally respor	nsible for supplying correct
number (if knov	wn). Answer every ques		, , , , , ,	goo, milo your name and case
	ur current marital status			
☐ Marrie ■ Not ma				
2. During the	last 3 years, have you l	ived anywhere other than where	you live now?	
		ved in the last 3 years. Do not inclu	•	Dates Dakton 2
Deptor 1 i	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Address:	Dates Debtor 2 lived there
16500 Sc Apt 4 Detroit, N	chaefer Hwy WI 48235	From-To: 03/2018 - 07/2019	☐ Same as Debtor 1	☐ Same as Debtor 1 From-To:
15050 Gr Apt 19 Detroit, N	reenfield Rd MI 48227	From-To: 04/2016 - 03/2018	☐ Same as Debtor 1	☐ Same as Debtor 1 From-To:
states and territo	ories include Arizona, Cali		tivalent in a community property sta New Mexico, Puerto Rico, Texas, Was Form 106H).	
Part 2 Expl	ain the Sources of Your	Income		
Fill in the to	otal amount of income you	received from all jobs and all busi	usiness during this year or the two penesses, including part-time activities. her, list it only once under Debtor 1.	orevious calendar years?
□ No				
Yes. F	Fill in the details.			
		Debtor 1	Debtor 2	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

□ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... still owe paid

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Tieara Denise Brooks		Cas	se number (if known)		
<i>Insid</i> of wh	in 1 year before you filed for bankrupt fers include your relatives; any general pa nich you are an officer, director, person in siness you operate as a sole proprietor. 1 ony.	artners; relatives of any gen a control, or owner of 20% of	neral partners; partners partners or more of their votin	erships of which yog g securities; and a	ou are a general ny managing ag	partner; corporation ent, including one for
	No Yes. List all payments to an insider.					
Insi	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment
insid	in 1 year before you filed for bankrupt ler? de payments on debts guaranteed or cos		yments or transfer a	any property on a	ccount of a dek	ot that benefited a
_	No Voc List all novements to an incider					
	Yes. List all payments to an insider der's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for the	
Part 4:	Identify Legal Actions, Repossession	ns. and Foreclosures	P			
List a modi	in 1 year before you filed for bankrupt all such matters, including personal injury fications, and contract disputes. No Yes. Fill in the details.					
Cas	e title	Nature of the case	Court or agency		Status of the	case
Cre Der	e number dit Acceptance Corp v Tieara nise Brooks 47233	Civil	36th District C Court Clerk 421 Madison S Detroit, MI 482	treet	☐ Pending ☐ On appea ☐ Concluded	
Chec	in 1 year before you filed for bankrupt ck all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	foreclosed, garnis	shed, attached,	seized, or levied?
Cre	ditor Name and Address	Describe the Property		Date		Value of the propert
	edit Acceptance Corp Box 5070	Explain what happene Wages	d	Bi-w	eekly	\$755.43
	uthfield, MI 48086	☐ Property was reposs ☐ Property was foreclos ☐ Property was garnish	sed.			
		☐ Property was attache	ed, seized or levied.			
acco	in 90 days before you filed for bankrup ounts or refuse to make a payment bec No Yes. Fill in the details.		cluding a bank or fil	nancial institutior	ı, set off any an	nounts from your
Cre	ditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amoun

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12.	Within 1 year before you filed for bankruptcy, v court-appointed receiver, a custodian, or another	was any of your property in the possession of an ner official?	assignee for the bene	efit of creditors, a
	■ No			
	☐ Yes			
Pai	t 5: List Certain Gifts and Contributions			
13.	■ No	did you give any gifts with a total value of more	than \$600 per person	?
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:		the ghts	
14.	,	did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or contribu	ution.		
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pai	t 6: List Certain Losses			
15.	or gambling? No Yes. Fill in the details.	r since you filed for bankruptcy, did you lose any	uning because of titel	t, me, other disaster,
	how the loss occurred Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	and diaming of line 33 of deficultie AVB. I Toperty.		
	·			
16.	consulted about seeking bankruptcy or prepar	did you or anyone else acting on your behalf pay ing a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Moran Law 25600 Woodward Ave Suite 201 Royal Oak, MI 48067 ecf@moranlawoffice.com	Pre-petition Chapter 7 Attorney's Fees	10/09/2019	\$100.00
	www.debtorcc.org	Pre-filing Credit Counseling Course	10/10/2019	\$14.95
	www.debtorcc.org			

Case number (if known)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Tieara Denise Brooks

Del	otor 1 Tieara Denise Brooks			Case numb	er (if known)	
17.	Within 1 year before you filed for bankrupto promised to help you deal with your credito Do not include any payment or transfer that you	ors or to make payment			y or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and transferred	value of any pro	perty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details.	ousiness or financial aff ade as security (such as	airs? the granting of a			
	Person Who Received Transfer Address	Description and property transfer		payme	pe any property or nts received or debts exchange	Date transfer was made
	Person's relationship to you			·	·	
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details.		ny property to a	self-settled	trust or similar device	of which you are a
	Name of trust	Description and	value of the pro	perty transf	erred	Date Transfer was made
						made
Par 20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, asso	cy, were any financial accou	ccounts or instru	uments held	d in your name, or for y	
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Huntington Bank 791 W. Big Beaver Troy, MI 48084	XXXX-7265	■ Checking □ Savings □ Money Mar □ Brokerage □ Other		Balance in the negative	\$0.00
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	r bankruptcy, ar	ny safe depo	osit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	☐ Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number,		Describe to	he contents	Do you still have it?
		State and ZIP Code)				

22.	Hav	e yo	ou stored pr	operty in a stora	age unit or pla	ace other than your home wit	hin 1 ye	ear before you filed for bankruptcy	??
		No	s. Fill in the	dotaila					
	Nar	me	of Storage I		(IP Code)	Who else has or had accesto it? Address (Number, Street, City, State and ZIP Code)	s C	Describe the contents	Do you still have it?
Par	t 9:	lc	dentify Prop	erty You Hold or	Control for S	,			
23.	•		hold or cor neone.	trol any propert	y that someo	ne else owns? Include any pi	operty	you borrowed from, are storing fo	r, or hold in trust
		No Ye	s. Fill in the	e details.					
	_		's Name SS (Number, St	reet, City, State and Z	(IP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	C	Describe the property	Value
Par	t 10:	G	ive Details	About Environm	ental Informa	tion			
For	the p	ourp	ose of Part	10, the following	g definitions a	apply:			
	toxi	c sı	ubstances, v	wastes, or mater	ial into the ai		roundw	ng pollution, contamination, releas vater, or other medium, including s	
			-	ation, facility, or utilize it, includi			ental lav	w, whether you now own, operate,	or utilize it or used
	Haz	ard	ous materia	•	g an environr	nental law defines as a hazar	dous w	vaste, hazardous substance, toxic	substance,
Rep	ort a	II no	otices, relea	ses, and procee	dings that yo	u know about, regardless of	when t	hey occurred.	
24.	Has	any	y governme	ntal unit notified	l you that you	may be liable or potentially l	iable u	nder or in violation of an environm	ental law?
		No)						
			s. Fill in the	details.					
			of site SS (Number, St	reet, City, State and Z	IP Code)	Governmental unit Address (Number, Street, City, St ZIP Code)	ate and	Environmental law, if you know it	Date of notice
25.	Hav	e yo	ou notified a	any governmenta	al unit of any	release of hazardous materia	11?		
		No Ye	s. Fill in the	details.					
			of site SS (Number, St	reet, City, State and Z	IP Code)	Governmental unit Address (Number, Street, City, St ZIP Code)	ate and	Environmental law, if you know it	Date of notice
26.	Hav	e yo	ou been a pa	arty in any judici	al or adminis	trative proceeding under any	enviro	nmental law? Include settlements	and orders.
		No Ye	s. Fill in the	details.					
			Title Number			Court or agency Name Address (Number, Street, City, State and ZIP Code)	N	Nature of the case	Status of the case
Par	t 11:	G	Sive Details	About Your Busi	iness or Coni	nections to Any Business			
27.	With	nin 4	4 years befo	ore you filed for b	bankruptcy, d	lid you own a business or ha	ve any	of the following connections to an	y business?
			A sole prop	orietor or self-em	nployed in a t	rade, profession, or other act	ivity, ei	ither full-time or part-time	
000				of a limited liabil		(LLC) or limited liability partr			
Offici	al For	rm 1	U/		Statement o	f Financial Affairs for Individuals	riling fo	ог вапкгиртсу	page

page 6

Debtor 1	Tieara Denise Brooks		Case number (if known)
	☐ A partner in a partnership			
	☐ An officer, director, or managing ex	ecutive of a corporation		
	☐ An owner of at least 5% of the votir	ng or equity securities of a corporation		
	No. None of the above applies. Go to	Part 12.		
	Yes. Check all that apply above and fil	Il in the details below for each business	5.	
	siness Name	Describe the nature of the business		Identification number
	dress nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not in	clude Social Security number or ITIN.
				siness existed
	e's Tasty Treat 373 Greenfield Rd	Baking	EIN:	8928
Ap	t 10 troit, MI 48227		From-To	08/2019 - Present
	Yes. Fill in the details below. me dress nber, Street, City, State and ZIP Code)	Date Issued		
Part 12:	Sign Below			
are true a with a ba 18 U.S.C.	and correct. I understand that making a	nancial Affairs and any attachments, an false statement, concealing property, \$250,000, or imprisonment for up to 20	or obtaining mo	oney or property by fraud in connection
	re of Debtor 1	Signature of Debtor 2		
Date (October 9, 2019	Date		
Did you a ■ No □ Yes	attach additional pages to <i>Your Statem</i>	ent of Financial Affairs for Individuals I	Filing for Bankr	uptcy (Official Form 107)?
Did you p ■ No	pay or agree to pay someone who is no	ot an attorney to help you fill out bankru	iptcy forms?	
☐ Yes. N	lame of Person Attach the <i>Bankru</i>	uptcy Petition Preparer's Notice, Declaration	on, and Signatur	e (Official Form 119).

United States Bankruptcy Court Eastern District of Michigan

In re	Tieara I	Denise Brooks	(Case No.		
		Debtor(s)		Chapter	7	
		STATEMENT OF ATTORNEY FOR DE PURSUANT TO F.R.BANKR.P. 20:				
	The unde	ersigned, pursuant to F.R.Bankr.P. 2016(b), states that:				
1.	The unde	ersigned is the attorney for the Debtor(s) in this case.				
2.	The com	pensation paid or agreed to be paid by the Debtor(s) to the undersigned is	s: [Check one	:]		
	[X]	FLAT FEE				
	A.	For legal services rendered in contemplation of and in connection with exclusive of the filing fee paid for services			Petition: Petition: Total:	100.00 1,260.00 1,360.00
	B.	Prior to filing this statement, received				100.00
	C.	The unpaid balance due and payable is				1,260.00
	[]	RETAINER				
	A.	Amount of retainer received				
	B.	The undersigned shall bill against the retainer at an hourly rate of \$agreed to pay all Court approved fees and expenses exceeding the amo			ırly rate sch	edule.] Debtor(s) have
3.	\$ 0.00	of the filing fee has been paid.				
4.	In return that do n	for the above-disclosed fee, I have agreed to render legal service for all a ot apply.]	aspects of the	bankrupt	cy case, incl	uding: [Cross out any
	A.	Analysis of the debtor's financial situation, and rendering advice to the bankruptcy;				le a petition in
	B. C.	Preparation and filing of any petition, schedules, statement of affairs an Representation of the debtor at the meeting of creditors and confirmation				ngs thereof:
	D.	-Representation of the debtor in adversary proceedings and other contest				,
	E. F.	Reaffirmations; -Redemptions;				
	G.	Other:				
		All fees governed by Fee Agreement.				
5.	By agree	ment with the debtor(s), the above-disclosed fee does not include the foll ADVERSARY PROCEEDINGS, MISC. MOTION	-		FEE AG	REEMENTS
6.	A. B. 7.	Debtor(s)' earnings, wages, compensation for services Other (describe, including the identity of payor) The undersigned has not shared or agreed to share, with any other person or poration, any compensation paid or to be paid except as follows:	·	with men	nbers of the	undersigned's law firm
Dated:	Octob	er 9, 2019 /	s/ Ryan B. I	Moran		
			Attorney for t Ryan B. Mo Moran Law 25600 Wood Suite 201 Royal Oak, 248) 246-65	ran P707 Iward Av MI 48067	753 ve ,	office.com
Agreed:		ara Denise Brooks				
	Tieara Debtor	ı Denise Brooks I	Debtor			
		•				

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

in re	Heara Denise Brooks		Case No.	
		Debtor(s)	Chapter	7
	VERII	FICATION OF CREDITOR N	MATRIX	
he ab	ove-named Debtor hereby verifies th	at the attached list of creditors is true and co	rrect to the best	of his/her knowledge.
Date:	October 9, 2019	/s/ Tieara Denise Brooks		
		Tieara Denise Brooks		
		Signature of Debtor		

Experian (Notice) PO Box 9554 Allen, TX 75013

Equifax (Notice) PO Box 740256 Atlanta, GA 30374

TransUnion (Notice) Po Box 2000 Chester, PA 19022

TeleCheck Services, Inc. (Notice) 5251 Westheimer Houston, TX 77056

Chex Systems, Inc. (NOTICE) Attn: Consumer Relations 7805 Hudson Road Suite 100 Woodbury, MN 55125

Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

Michigan Department of Treasury PO Box 30199 Lansing, MI 48909-7699

Unemployment Insurance Agency (NOTICE) Benefit Overpayment Collection Unit PO Box 9045 Detroit, MI 48202

Michigan Office of Child Support -NOTICE Central Functions Unit PO Box 30478 Lansing, MI 48909

United States Attorneys Office Attn: Civil Division 211 W. Fort Street, Suite 2001 Detroit, MI 48226 36th District Court Court Clerk 421 Madison Street Detroit, MI 48226

Akron Billing Center 2620 Ridgewood Rd Suite 300 Akron, OH 44313

Americollect PO Box 1566 814 S. 8th St. Manitowoc, WI 54221-1566

Arbor Professional Sol 2090 S. Main Street Ann Arbor, MI 48103

Beaumont 750 Stephenson Highway PO Box 5042 Troy, MI 48007

Capital One Bank Usa N Po Box 30281 Salt Lake City, UT 84130

Check Into Cash PO Box 550 Cleveland, TN 37364

Citizens Bank One Citizens Plaza Providence, RI 02903

City of Dearborn PO Box 2122 Riverview, MI 48193

City of Dearborn Fire Department 3750 Greenfield Rd. Dearborn, MI 48120

Comcast 2780 Beach Rd. Port Huron, MI 48060

Convergent Outsourcing Po Box 9004 Renton, WA 98057

Credit Acceptance Corp Po Box 5070 Southfield, MI 48086

Credit One Bank Na Po Box 98872 Las Vegas, NV 89193

Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773

Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773

First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107

Henry Ford Community College Learning Resource Center Cashier's Office 5101 Evergreen Road Dearborn, MI 48128

Huntington Bank Attn: Bankruptcy 6101 W. 130th St. NE-08 Parma, OH 44130

Jefferson Capital Sys, LLC PO Box 953185 Saint Louis, MO 63195 Mary Jane M Elliott 24300 Karim Blvd. Novi, MI 48375

Medical Center Emergency Services PO Box 96115 Oklahoma City, OK 73143

National Credit System P.o. Box 312125 Atlanta, GA 31131

Roosen, Varchetti & Oliver PLLC P.O. Box 2305 Mount Clemens, MI 48046

Senyah El Management Group 24724 Farmbrook Rd Suite 100 Southfield, MI 48034

Trumbull Crossing Apartments 5500 Trumbull St, Detroit, MI 48208

United Collection Bureau Inc. 5620 Southwyck Blvd. Toledo, OH 43614

Us Dept Of Ed/glelsi 2401 International Lane Madison, WI 53704

Wayne County Community College Office of the General Counsel 801 W. Fort St. Detroit, MI 48226